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ABSTRACT OF THE DISCLOSURE

Amniotic sac-rupturing devices are disclosed in various configurations that are mounted on the hand of a physician to present a shielded hook, positioned on the physician's fingertip, supported by a flexible but firm substrate that extends from the fingertip to the palm and yet conforms to the corresponding contours of the finger during use, while still exposing critical portions of the fingertip for digitally examining an expectant mother's cervix prior to rupturing the amniotic sac. The sac-rupturing devices include a split ring mid-length, and a widened base handle that fits in the palm, to also help secure the hook on the physician's finger and ensure that the hook is readily withdrawn from the birth canal after rupturing the amniotic sac. Alternative hook arrangements are also disclosed, as well as methods of using the same.